

Certification

I declare to the best of my knowledge and belief that the attached document(s) are true electronic copies of the executed collective negotiations agreement(s) and the included summary is an accurate assessment of the collective bargaining agreement for the term beginning 9/1/2014 thru 8/31/2019.

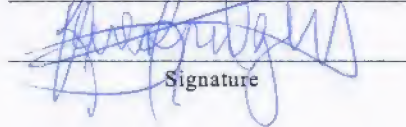
Employer: Essex County College

County: Essex

Date: 9/12/2018

Name: Karen Bridgett
Print Name

Title: Associate Director, Human Resources


Signature